MUST BE COMPLETED IN FULL FOR PLACEMENT CONSIDERATION.

(For Donations, use Section B)

Account Name	Impact Fee			<u> </u>		
Account Number	3960E	7400	6800	0171	C1800	
	Fund	Function	Object	Cost Center	Project	Sub Projec
Original Approved Budget 48,460.00	Budget + Amendments - 0.00	Expenditures / Encumbrances To Date	Current = Available Budget \$48,460.00	Present Request 48,460.00	Remaining Balance Available 0.00	
Account Name						•
	-					
Account Number	Fund	Function	Object	Cost Center	Project	Sub Projec
Original Approved Budget	Budget + Amendments	Expenditures / Encumbrances To Date	Current = Available Budget	Present - Request	Remaining = Balance Available	
	\$	\$	\$	\$	\$	
Item Currently Not Budg	geted -**					
Funding Source Account Name Account Number	Fund	Function	Object	Cost Center	Project	Sub Projec
Funding Source Account Name	Fund		- Object	Cost Center	- Project	Sub Projec
Funding Source Account Name Account Number	Fund		Object	Cost Center	Project	Sub Projec
Funding Source Account Name Account Number Amount	Fund		Object	Cost Center	Project	Sub Projec
Funding Source Account Name Account Number Amount Funding Source	Fund		Object	Cost Center	Project	Sub Project
Funding Source Account Name Account Number Amount Funding Source Account Name	Fund \$					
Funding Source Account Name Account Number Amount Funding Source Account Name Account Number	Fund \$					
Funding Source Account Name Account Number Amount Funding Source Account Name Account Number Amount	Fund \$					
Funding Source Account Name Account Number Amount Funding Source Account Name Account Number Amount History Check one:	Fund \$					

** WHEN ITEM NOT CURRENTLY BUDGETED IS APPROVED BY THE SCHOOL BOARD, THIS WILL SERVE AS THE BUDGET AMENDMENT**